

AC. 4411(3)

Urban District of Brentwood



Annual Report

of the

Medical Officer of Health

and the

Chief Public Health Inspector

for

1969





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URBAN DISTRICT OF BRENTWOOD

A N N U A L R E P O R T

of the

MEDICAL OFFICER OF HEALTH

and the

CHIEF PUBLIC HEALTH INSPECTOR

for 1969.

URBAN DISTRICT OF BRENTWOOD

MEMBERS OF THE COUNCIL as at
31st DECEMBER, 1969.

Chairman: H. Van den Branden J.P.

Vice-Chairman: N.R. Thain

Mrs. A. Bloomfield	
W.T. Brocklebank	
R.G. Chapman	
F.E.J. Chitty	
M.C. Copsey	
J.L.M. Crofton	
C.G. Covell	
A.J. Davidson	
E. Forth	
S.G. Golding	
G.C. Green	
J.A.S. Hodgson	(3)
Mrs. M. Hutton	
J.A. Isgrove	
E.A. Mather	
D. Muldoon	
E.W. Nicholson	(1)
J.W.E. Reddell	(1)
G de C. Rolls	
J.S. Rowe	(1)
F.W.C. Salway	(1)
J.A. Sanderson	(1)
J.K. Savage	(1)
R.W. Sibley	(1)
G.H. Thorne	(1)
J.M. Tyrer	(1)
Mrs. J.I. Watson	(2)
L.B. Wickes	

- (1) Member of the Health and Sewerage Committee;
- (2) Chairman of the Health and Sewerage Committee;
- (3) Vice-Chairman of the Health and Sewerage Committee.

PUBLIC HEALTH DEPARTMENT

STAFF - 1969

MEDICAL OFFICER OF HEALTH

Dr. James Gorman, M.B., Ch.B., D.P.H., F.R.S.H.,

DEPUTY MEDICAL OFFICER OF HEALTH

Dr. T.D. Blott, B.Sc., M.B., B.S., D.P.H.. Barrister at Law.

CHIEF PUBLIC HEALTH INSPECTOR

Mr. P.T. Shelton, M.A.P.H.I., M.R.S.H., Public Health Inspector, Meat and Food Inspector, Royal Society of Health's Certificate in Sanitary Science as applied to Buildings and Public Works, Final Examination Chartered Auctioneers' and Estate Agents Institute.

DEPUTY CHIEF PUBLIC HEALTH INSPECTOR

Mr. E.A. Sheppard, M.A.P.H.I., C.R. San.I., Public Health Inspector, Meat and Food Inspector, Royal Society of Health's Certificate in Sanitary Science as applied to Buildings and Public Works.

SENIOR DISTRICT PUBLIC HEALTH INSPECTOR

Mr. G.D. John, M.A.P.H.I., C.R. San.I., Public Health Inspector, Meat and Food Inspector, Royal Society of Health's Diploma for Smoke Inspectors.

DISTRICT PUBLIC HEALTH INSPECTORS

Mr. M.A. Jackson, Public Health Inspectors' Certificate of the P.H.I.E.B., Royal Society of Health's Diploma for Inspection of Meat and Other Foods.

Mr. T.P. Gibbs, M.A.P.H.I., Public Health Inspectors' Diploma of P.H.I.E.B., Royal Society of Health's Diploma for Smoke Inspectors.

CLERKS

Miss Evelyn P. Turff A.R.S.H.

Mrs. Theresa Clark Aff.R.S.H.

Telephone:

Brentwood 1850, ext. 519.

Health Department,
Council Offices,
Ingrave Road,
Brentwood. Essex.

To the Chairman and Members of the
Urban District Council of Brentwood.

Mr. Chairman, Ladies and Gentlemen,

I beg to present my Annual Report for 1969. Although the general public health features of this report are satisfactorily of a somewhat mundane character, it might be permissible to comment on the general public health picture and the position of the Medical Officer of Health in relation thereto.

However well the social services of the future may run, it is essential that if they are to be successful they will still have to be provided through the agency of a complex and skilled team. Although they appear likely in many incidences to be more divorced from the Medical Officer of Health than they are at present, they have to deal with so many problems of basic medical relevance that irrespective of their overall control the medical member, versed in matters of public health, has still an essential contribution to make towards the well-being and ultimate success of the new social services, and this at a significant level.

The term Community Physician is being increasingly used without, regrettably, repetition involving definition. So many avenues of opportunity are quoted as being open to him that this in itself suggests that a clear idea of his specific functions has not yet emerged, if it has indeed been conceived.

It is true that when a child is born his future contribution to society cannot reasonably be expected to be predictable with any accuracy. One can only hope that the title of Community Physician which at once sounds authoritative and comprehensive may ultimately prove to have it's implications reflected by it's realities. It may well be that someone of this nature will, in fact, require specialised training to play a full part in the new service pattern, and one role which has been mooted for him is that of a co-ordinator of the various medical and social services - in effect a sort of medico-social catalyst. This kind of contribution would represent opportunity, but even after special-ised training, would present a task more potentially frustrating than rewarding.

The future of many of the present Medical Officers of Health in the new National Health Service, Social Services, and Hospital framework must again be a matter of conjecture, if not apprehension. Until the structure emerges in clearer outline, it is impossible to say with any conviction that his contribution on the present scale is assured. It may well be that my personal reflection would prove much too guarded, but if the ordinary Medical Officer of Health could be somewhat irreverently likened to a participant in a game of 'snakes and ladders' I would, at the moment, think that the ladders were somewhat less in evidence.

It is clear that in the ultimate organisation it is the service afforded to the community and its individual members which matters. It is, I think, very difficult at one and the same time to have a substantially increased central control, with large individual units and at the same time to effect a degree of decentralisation which will enable the individual member of the community to be brought as personally into the picture as would be the case in smaller units (although any disadvantage in this regard might well be compensated for by an improvement in the nature of the services offered). So long as it is not too generally assumed that the past has little to offer in planning for the future, then clearly changes can be harnessed into progress.

The Public Health Medical Officer can make a contribution to any new service which no one else can. He should, therefore, be utilised and not discarded. In fairness to new entrants to the service who are career minded, his future should be determined as a matter of priority and planned, not assumed.

This is not an expression of pessimism, but a plea for realism until optimism is justified.

I am indebted to Dr. J.A.C. Franklin, County Medical Officer of Health, for permission to detail the services under his control, and to all those who have contributed in submitting reports for my third Annual Report.

I would again like to express my thanks to all members of the Public Health Department, and especially to Mr. Shelton and Miss Turff.

I am,

Mr. Chairman, Ladies and Gentlemen,

Your obedient servant,

JAMES GORMAN.

URBAN DISTRICT OF BRENTWOOD

BRENTWOOD - a residential area - is in the heart of the Metropolitan Green Belt. The Urban District has an area of 18,269 acres and the number of residents has increased in post-war years from 27,730 (1946) to the present figure of 58,250.

Only limited areas remain available for further housing development and the ultimate population of the Urban District is not likely to exceed about 60,000.

The town centre is 400 feet above sea level and commands views of a pleasant, well wooded countryside. Large areas of parklands and other open spaces have been acquired for use by the public. Many of the woodland areas have been protected from unrestricted felling and there is, in the residential areas, an air of spaciousness which is enhanced by a wealth of forest and decorative trees.

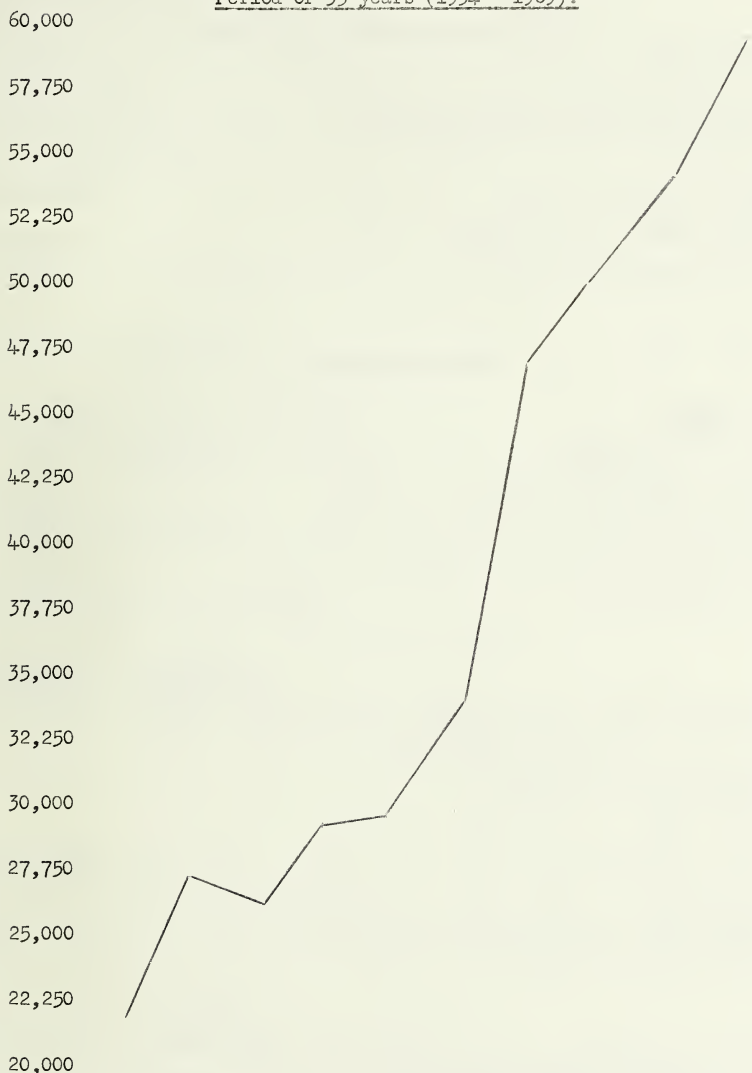
The Urban District of Brentwood was constituted an Urban Authority in April, 1899, and consisted of the old Parish of Brentwood, having an area of 354 acres, and a population, according to the Census of 1901, of 4,932.

It is interesting to note, however, that the inhabitants of Brentwood in 1801 totalled 1,007. In fifty years the population increased by 1,198 showing a figure of 2,205 for 1851. Between the years of 1851 to 1901 there was a further increase of 2,727. In 100 years the population had increased by 3,925.

The Census taken in the following years show a gradual rise in the population of Brentwood, from 1901 - 4,932; to the Census of 1911 - 6,923; to the Census of 1919 - 6,288; to the Census of 1921 - 6,910; and to the Census of 1931 of 7,208, which shows an increase of only 2,276 in 30 years.

When Brentwood's boundaries were extended in 1934, this naturally increased the population, and the estimated resident population for that year was 21,435. In this period of 30 years from 1934 to 1964, the population had increased by 32,795, as compared with the previous thirty year period of only 2,276. The Census for 1961 - 49,242 as against the previous Census for 1951 - 29,897, shows an increase of 19,683 in 10 years.

Urban District of Brentwood - Population
Period of 35 years (1934 - 1969).



Years: 1934. 1939. 1944. 1949. 1951. 1954. 1959. 1961. 1964. 1969.
Census Census

The Census taken in 1931 showed the population to be 7,208, this was before the Brentwood boundaries were extended in 1934. This graph shows the rapid rise in the population over the past twenty years from 1949 - 1969. (Estimated Civilian population during 1940 - 1949).

Section " A "

STATISTICS AND SOCIAL CONDITIONS

Area in Acres	....	....	....	18,269
Estimated (mid-year) Resident Population (Registrar General's figures)			....	58,250
Rateable Value		....	....	£2,646,927
Sum represented by a Penny Rate	....		....	£10,800
Number of Inhabited Houses	....		....	18,136

VITAL STATISTICS

<u>Live Births:</u>	M.	F.	Total	(1968)
Total Number of Births	463	411	874	860
Number of Legitimate Births	440	388	828	818
Legitimate Births (% of total live births)			94.74%	95.11%
Number of Illegitimate Births	23	23	46	42
Illegitimate Births (% of total live births)			5.26%	4.88%
Crude Birth Rate per 1,000 population			15.0	14.91
Area Comparability Factor			0.93	0.93
Local Adjusted Rate			14.0	13.86

	<u>Brentwood</u>		<u>England & Wales</u>	
	<u>1969.</u>	<u>1968.</u>	<u>1969</u>	<u>1968.</u>
Live Births - Local adjusted rate	14.0	13.86	16.3	16.9
Illegitimate live births as percentage of all live births	5.0	4.88	8.0	

Still Births:

	M	F.	Total	(1968)
Number of Stillbirths	7	7	14	7
Legitimate	7	7	14	7
Illegitimate	-	-	-	-
Stillbirths per 1,000 total live & stillbirths			16.0	8.07
Total Live and Stillbirths			888	867

	<u>Brentwood</u>		<u>England & Wales</u>	
	<u>1969.</u>	<u>1968.</u>	<u>1969.</u>	<u>1968.</u>
Stillbirth Rate per 1,000 total live and stillbirths	16.0	8.07	13.0	14.3

<u>Deaths:</u>	<u>M.</u>	<u>F.</u>	<u>Total (1968)</u>	
Total Deaths	302	397	699	701
Crude Death Rate			12.0	12.2
Area Comparability Factor			0.77	0.78
Local Adjusted Rate			9.20	9.48

	<u>Brentwood</u>		<u>England & Wales</u>	
	<u>1969.</u>	<u>1968.</u>	<u>1969</u>	<u>1968</u>
Death Rate per 1,000 population	9.20	9.48	11.9	11.9

<u>Infant Mortality Rates:</u>	<u>1969</u>	<u>1968</u>
Deaths under 1 year per 1,000 live births	10	13
Deaths of legitimate infants under 1 year per 1,000 legitimate live births	11	13
Deaths of illegitimate infants under 1 year per 1,000 illegitimate live births	Nil	Nil

<u>Neonatal Mortality Rate:</u>		
Deaths under 4 weeks per 1,000 live births	6	9

<u>Early Neonatal Mortality Rate:</u>		
Deaths under 1 week per 1,000 total live births	3	8

<u>Perinatal Mortality Rate:</u>		
Stillbirths and deaths under 1 week combined per 1,000 total live and stillbirths.	19	16

	<u>Brentwood</u>		<u>England & Wales</u>	
	<u>1969</u>	<u>1968.</u>	<u>1969.</u>	<u>1968.</u>
Infant Mortality Rate	10.0	13.0	18.0	18.0
Legitimate Infant Mortality Rate	11.0	13.4	17.0	
Illegitimate Infant Mortality Rate	Nil	Nil	25.0	
Neonatal Mortality Rate	6.0	9.3	12.0	12.3
Early Neonatal Mortality Rate	3.0	8.1	10.0	10.5
Perinatal Mortality Rate	19.0	16.1	23.0	25.0

Apart from the fact that the Still Birth rate is up somewhat as compared to last year, and that the Infant Mortality rate is lower than last year, (and better than the national average) the most apparent feature of the statistics is their approximation to last year's figures.

NUMBERS OF DEATHS BY CAUSE, IN SEX AND AGE GROUPS

Cause of Death	Total All Ages		Under 4 weeks		4 weeks & under 1 year		1 - 4		5 - 14		15 -
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.
1. Tuberculosis of Respiratory System	2	-	-	-	-	-	-	-	-	-	-
2. Other Infective and Parasitic Diseases	-	1	-	-	-	1	-	-	-	-	-
3. Malignant - Buccal Neoplasm: Cavity etc.	1	1	-	-	-	-	-	-	-	-	-
4. -do- Oesophagus	1	-	-	-	-	-	-	-	-	-	-
5. -do- Stomach	7	2	-	-	-	-	-	-	-	-	-
6. -do- Intestine	5	11	-	-	-	-	-	-	-	-	-
7. -do- Lung, Bronchus	25	5	-	-	-	-	-	-	-	-	-
8. -do- Breast	1	15	-	-	-	-	-	-	-	-	-
9. -do- Uterus	-	4	-	-	-	-	-	-	-	-	-
10. -do- Prostate	5	-	-	-	-	-	-	-	-	-	-
11. Leukaemia	6	3	-	-	-	-	1	-	1	-	-
12. Other Malignant Neoplasms	6	15	-	-	-	-	-	-	-	-	-
13. Benign & Unspecified "	1	1	-	-	-	-	-	-	-	-	-
14. Diabetes Mellitus	-	1	-	-	-	-	-	-	-	-	-
15. Other Endocrine Diseases	-	3	-	1	-	-	-	-	-	-	-
16. Mental Disorders	-	1	-	-	-	-	-	-	-	-	-
17. Other Diseases of Nervous System etc.	6	7	-	-	-	-	-	-	-	-	1
18. Chronic Rheumatic Heart Disease	-	5	-	-	-	-	-	-	-	-	-
19. Hypertensive Disease	4	2	-	-	-	-	-	-	-	-	-
20. Ischaemic Heart Disease	95	120	-	-	-	-	-	-	-	-	-
21. Other Forms of Heart "	7	16	-	-	-	-	-	-	-	-	-
22. Cerebrovascular Disease	33	58	-	-	-	-	-	-	-	-	1
carried forward	205	271	-	1	-	1	1	-	1	-	2

25 - 34		35 - 44		45 - 54		55 - 64		65 - 74		75 & over		Total:	
M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
-	-	-	-	-	-	-	-	1	-	1	-	2	-
-	-	-	-	-	-	-	-	-	-	-	-	-	1
-	-	-	1	-	-	-	-	-	-	1	-	1	1
-	-	-	-	-	-	1	-	-	-	-	-	1	-
-	-	-	-	-	-	3	-	2	-	2	2	7	2
-	-	-	-	-	-	3	2	-	5	2	4	5	11
-	-	1	-	2	-	8	1	8	2	6	2	25	5
-	-	-	-	-	4	-	3	1	2	-	6	1	15
-	-	-	1	-	-	-	2	-	-	-	1	-	4
-	-	-	-	-	-	1	-	2	-	2	-	5	-
-	-	-	-	-	-	1	2	2	1	1	-	6	3
1	-	-	1	1	3	2	4	1	4	1	3	6	15
-	-	-	-	-	1	1	-	-	-	-	-	1	1
-	-	-	-	-	-	-	-	-	-	-	1	-	1
-	-	-	-	-	-	-	1	-	-	-	1	-	3
-	-	-	-	-	-	-	-	-	1	-	-	-	1
-	-	-	1	-	2	-	-	2	-	3	4	6	7
-	-	-	-	-	-	-	2	-	1	-	2	-	5
-	-	-	-	1	-	1	-	2	1	-	1	4	2
-	2	-	6	1	28	10	29	27	30	82		95	120
-	-	-	-	-	1	-	-	1	6	15		7	16
-	-	-	1	-	6	3	6	8	19	47		33	58
-	3	4	11	11	56	30	56	53	74	171		205	271

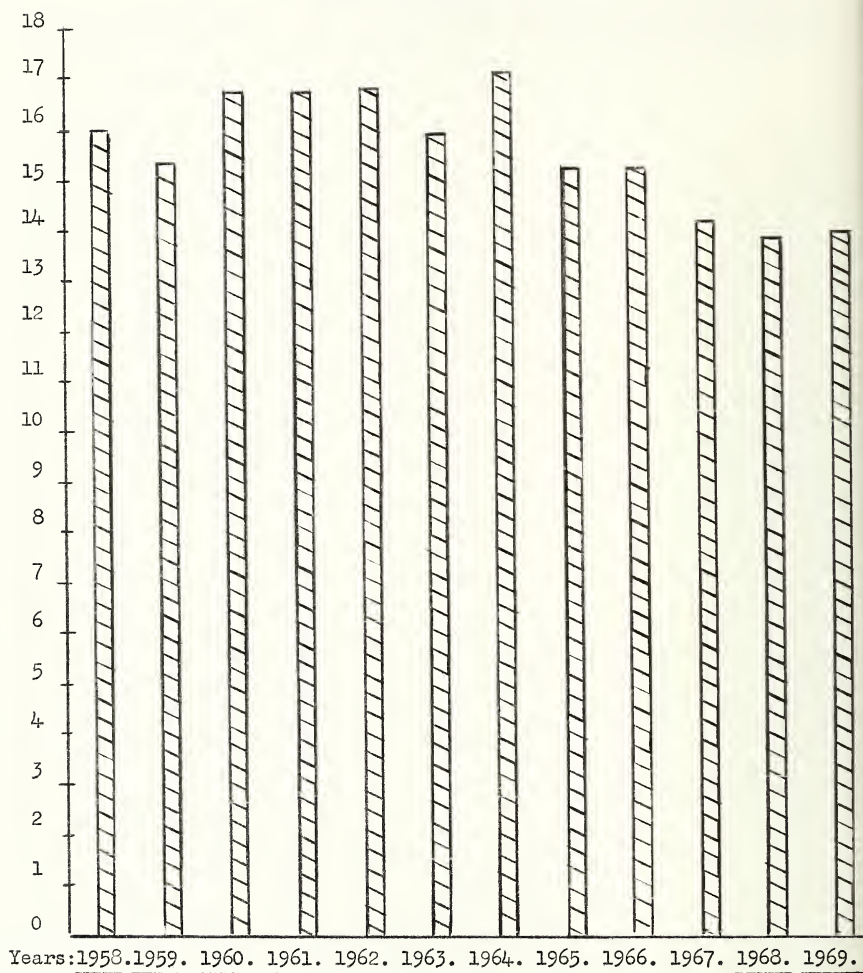
Numbers of Deaths by Cause, in Sex and Age Groups - continued

Cause of Death	Total All ages		Under 4 weeks		4 weeks & under 1 year		1 - 4		5 - 14		15 - 24	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Brought forward	205	271	-	1	-	1	1	-	1	-	2	-
23. Other Diseases of Circulatory System	8	21	-	-	-	-	-	-	-	-	-	-
24. Influenza	2	4	-	-	-	-	-	-	-	-	-	-
25. Pneumonia	22	46	1	-	-	1	-	-	-	-	-	-
26. Bronchitis & Emphysema	23	16	-	-	-	-	-	-	-	-	-	-
27. Asthma	1	2	-	-	-	-	-	-	-	-	-	-
28. Other Diseases of Respiratory System	6	3	-	-	1	-	-	-	-	-	-	-
29. Peptic Ulcer	4	1	-	-	-	-	-	-	-	-	-	-
30. Intestinal Obstruction and Hernia	1	2	-	-	-	-	-	-	-	-	-	-
31. Other Diseases of Digestive System	2	6	-	-	-	-	-	-	-	-	-	-
32. Nephritis and Nephrosis	3	-	-	-	-	-	-	-	-	-	-	-
33. Hyperplasia of Prostate	3	-	-	-	-	-	-	-	-	-	-	-
34. Other Diseases - Genito- Urinary System	1	5	-	-	-	-	-	-	-	-	-	-
35. Diseases of the Skin Subcutaneous Tissue	1	-	-	-	-	-	-	-	-	-	-	-
36. Diseases of Musculo- Skeletal System	2	1	-	-	-	-	-	-	-	-	-	-
37. Congenital Anomalies	1	4	-	1	-	1	-	-	-	-	1	1
38. Birth Injury, Difficult Labour etc.	-	2	-	2	-	-	-	-	-	-	-	-
39. Symptoms and Ill Defined Conditions	2	1	-	-	-	-	-	-	-	-	-	-
40. Motor Vehicle Accidents	7	-	-	-	-	-	-	-	-	-	3	-
41. All Other Accidents	8	10	-	-	-	-	1	-	-	-	1	-
42. Suicide & Self-inflicted Injuries	-	1	-	-	-	-	-	-	-	-	-	-
43. All Other External Causes	-	1	-	-	-	-	-	-	-	-	-	-
Totals:	302	397	1	4	1	3	2	-	1	-	7	1

25 - 34		35 - 44		45 - 54		55 - 64		65 - 74		75 & over		Total:		
M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
1	-	3	4	11	11	56	30	56	53	74	171	205	271	
-	-	-	-	1	-	-	1	3	4	4	16	8	21	
-	-	-	-	-	-	-	-	2	2	-	2	2	4	
-	-	-	-	-	-	-	1	4	9	17	35	22	46	
-	-	-	1	1	-	2	2	9	2	11	11	23	16	
-	-	-	-	-	-	-	1	1	-	-	1	1	2	
-	-	-	-	-	1	-	-	2	1	3	1	6	3	
-	-	-	-	-	-	3	1	1	-	-	-	4	1	
-	-	-	-	-	-	-	1	1	-	-	1	1	2	
-	-	-	-	-	-	-	1	1	1	1	4	2	6	
-	-	-	-	-	-	-	-	1	-	2	-	3	-	
-	-	-	-	-	-	-	-	-	-	3	-	3	-	
-	-	-	-	-	-	-	1	-	2	1	2	1	5	
-	-	-	-	-	-	-	-	-	-	1	-	1	-	
-	-	-	-	-	-	1	1	1	-	-	-	2	1	
-	-	-	-	-	-	-	1	-	-	-	-	1	4	
-	-	-	-	-	-	-	-	-	-	-	-	-	2	
-	-	-	-	-	-	-	-	-	-	2	1	2	1	
-	-	1	-	-	-	3	-	-	-	-	-	7	-	
2	-	2	-	-	-	1	1	-	-	1	9	8	10	
-	-	-	-	-	-	-	1	-	-	-	-	-	1	
-	1	-	-	-	-	-	-	-	-	-	-	-	1	
1	3	1	6	5	13	12	66	43	82	74	120	254	302	397

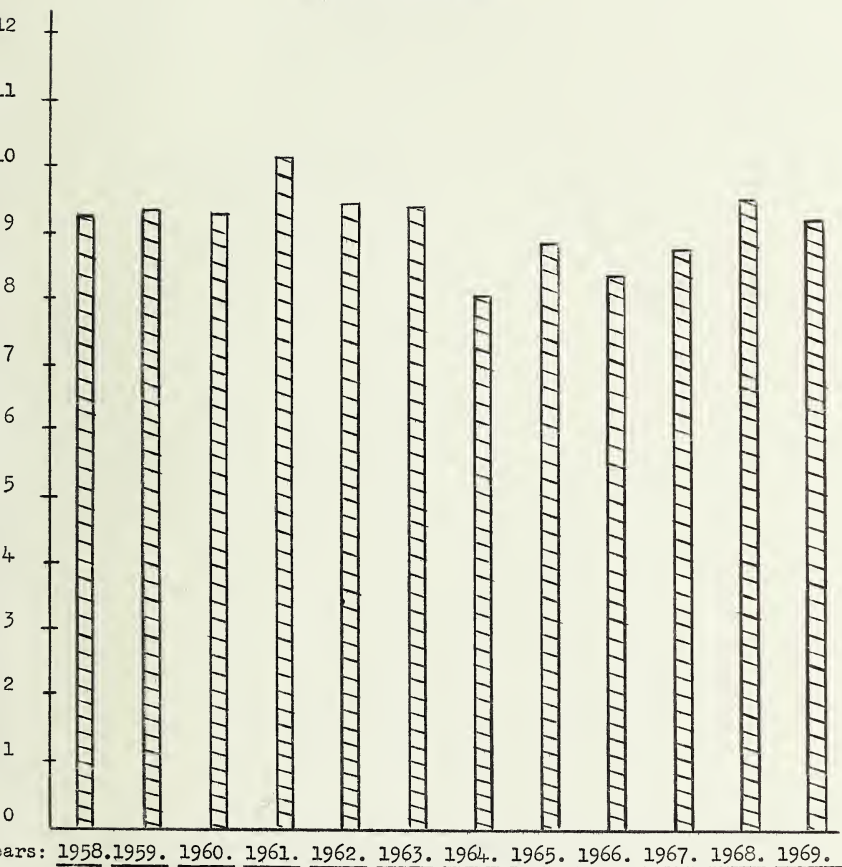
BIRTH RATES per 1,000 Population

Local Adjusted Rate



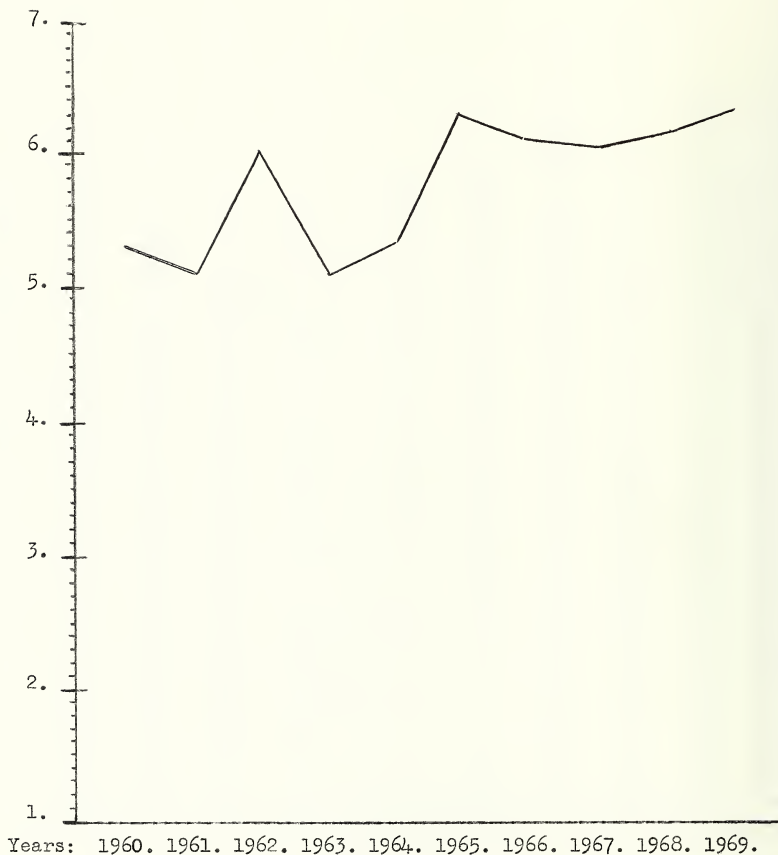
DEATH RATES per 1,000 Population

Local Adjusted Rate



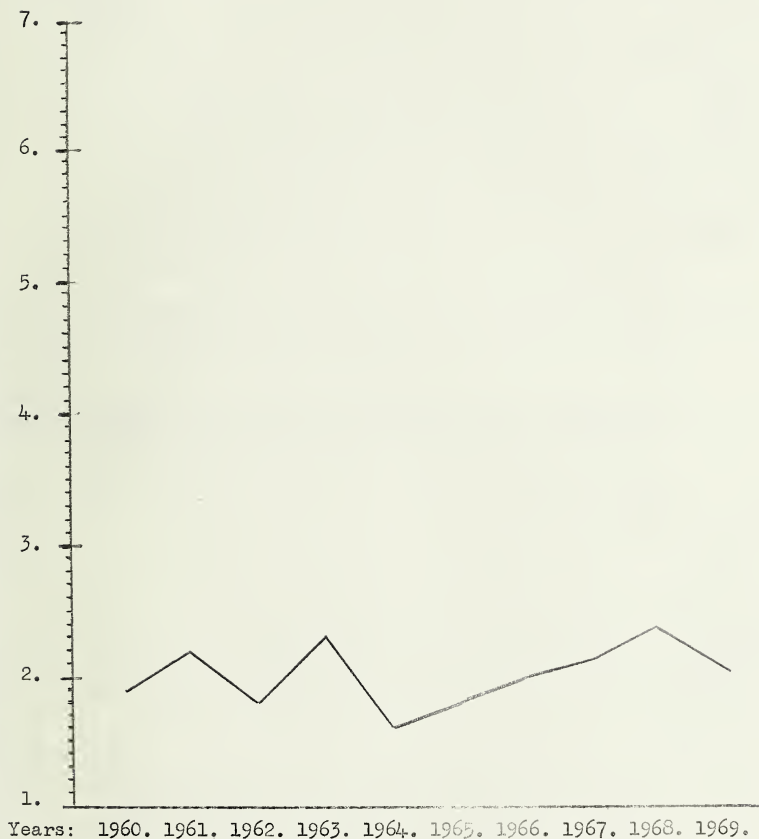
HEART and CIRCULATORY DISEASES -

Causes of Death per 1,000 Population



MALIGNANT NEOPLASMS

Cause of Death per 1,000 Population



Malignant neoplasms have caused fewer deaths notably in the field of stomach cancer - reduced from 17 to 9, and cancer of the uterus reduced from 9 to 4, whilst Leukaemia deaths have risen.

ANALYSIS OF NOTIFIABLE DISEASES UNDER AGE GROUPS

Diseases:	Under		1 year		1 year		2 years		3 years		4 years		5- 9		10 - 14	
	1 year		1 year		2 years		3 years		4 years		5- 9		10 - 14			
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Measles	9	5	20	30	24	22	24	19	11	19	44	46	1	1		
Dysentery	-	-	-	-	1	-	-	-	-	-	-	1	-	2		
Scarlet Fever	-	-	-	-	-	-	-	2	-	1	8	6	1	1		
Whooping Cough	-	-	-	-	1	-	1	-	-	-	1	1	-	1		
Infective Jaundice	-	-	-	-	-	-	-	-	-	-	4	-	1	1		
Tuberculosis (Respiratory)	-	-	-	-	1	-	-	-	-	-	-	-	-	-		
(Other Forms)	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
Acute Encephalitis	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
Paratyphoid Fever	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
Food Poisoning	-	-	-	2	2	1	1	1	3	3	9	5	2	3		
Erysipelas	-	1	-	-	-	-	-	-	-	-	-	-	-	-		
Totals:	9	6	20	32	29	23	26	22	14	23	66	59	5	9		

Diseases:	15 -24		25 -44		45 -64		65 -74		75 +		Totals:		Gross Total:	
	15 -24		25 -44		45 -64		65 -74		75 +		Totals:		Gross Total:	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
Measles	-	-	1	3	-	-	-	1	-	-	134	146	280	
Dysentery	1	-	1	1	-	-	-	-	-	-	3	4	7	
Scarlet Fever	-	-	-	1	-	-	-	-	-	-	9	11	20	
Whooping Cough	-	-	-	-	-	-	-	-	-	-	3	2	5	
Infective Jaundice	1	-	-	1	1	-	-	-	-	-	7	2	9	
Tuberculosis (Respiratory)	1	-	1	-	-	1	-	1	1	-	4	2	6	
(Other Forms)	-	1	-	1	-	-	-	1	-	1	-	4	4	
Acute Encephalitis	-	-	-	-	-	-	1	-	-	-	1	-	1	
Paratyphoid Fever	-	-	-	-	-	1	-	-	-	-	-	1	1	
Food Poisoning	1	4	5	7	3	1	-	-	-	-	26	27	53	
Erysipelas	-	-	-	-	-	-	1	-	-	-	1	1	2	
Totals:	4	5	8	14	4	3	2	3	1	1	188	200	388	

INFECTIOUS DISEASES

The following is a comparative table of notification of infectious disease :-

	<u>1969.</u>	<u>1968.</u>
Measles	280	55
Dysentery	7	45
Scarlet Fever	20	7
Whooping Cough	5	38
Infective Jaundice (Hepatitis)	9	4
Tuberculosis (Respiratory)	6	13
Tuberculosis (Other Forms)	4	1
Acute Encephalitis	1	-
Paratyphoid Fever	1	-
Food Poisoning	53	9
Erysipelas	2	2
	<hr/>	<hr/>
Totals:	388	174
	<hr/>	<hr/>

The main features of the notifications are the reduction of Measles cases, and notably decreased incidence of Whooping Cough from 140 cases in 1967, to 38 cases in 1968, to 5 cases in 1969.

Food Poisoning:

It will be seen that 53 notifications were received, but on analysis, however, 37 of these cases on investigation proved negative. (no pathogenic organisms isolated). Whilst a further 11 showed the cases to be suffering from sonnei dysentery, the 5 cases finally demonstrated as due to food poisoning organisms incriminated:-

Salmonella Enteriditis	-	3 cases
Salmonella Tarshyne	-	1 case
Salmonella Para-typhi B	-	1 case

It is inevitable that normally speaking the vast majority of notified cases may well turn out to be negative, but the important thing is that suspect cases should be brought to our notice, so that a full investigation may be undertaken and preventive measures instituted at a time early enough for them to be of real value.

OTHER ORGANISATIONS AND SERVICESBrentwood Tuberculosis and Chest Care Association:

The Hon:Secretary of this Association, Mrs. T. Clark, notes as follows:-

"During the year 1969 whereas approximately the same numbers of patients had received help, the accent had been away from tuberculosis and towards chronic bronchitics, cancer of the lung and heart conditions. The reporting of cases in need, the visiting and varied forms of assistance given, reflected great credit on both Health Visitors and the Lay Visitors attached to the Association.

The general policy regarding assistance had remained the same - help being given in kind rather than cash. Regular supplies of milk, eggs and Complan had been maintained and had proved to be beneficial. No patients had been sent on holiday during 1969, as at the beginning of the year when arrangements might have been made, the financial position was such that no money could be spared for this purpose. The situation did improve, however, when in response to an appeal for help, the Brentwood Urban District Council made a most generous grant to the Association. In addition to this, the members of the Committee raised a further sum of money when they held a one-day "Thrifty Shop". This event was well supported and the profit made was indicative of the great number of articles donated and the many hours of "cheerful haggling" on the day. By these means the Association were able to keep up the standard of care available.

The Association were extremely pleased to learn that their Chairman, Doctor J. Rix had been elected to represent T.B. & Chest Care Committees on the Mid-Essex Health Area Sub-Committee, and were confident that he would prove a most valuable member of this Committee.

A Regional Conference of Care Committee Representatives, organised by the Chest and Heart Association under the Chairmanship of Doctor J.A.C. Franklin, County Medical Officer, had been attended. This meeting was addressed by Doctor J.B. Millard, Director, Passmore Edwards Medical Rehabilitation Centre, who urged that more help be given to heart patients. He also suggested that Committees could embrace the Group of Haemiplegics, who face many problems and frustrations."

Welfare Services - Voluntary Organisations:

The under-mentioned organisations received grants from the Brentwood Urban District Council during 1969 :-

Meals on Wheels Service	- £500
Holidays for Old People	- £500
Citizens Advice Bureau	- £620
Home Safety	- £250
Aids to Charities - Carnival etc.	- £200
Tuberculosis & Chest Care Association	- £150
Marriage Guidance Council	- £100

All of the above organisations render valuable service to the community, especially to those most in need.

WATER SUPPLY

I have received reports from both the South Essex Waterworks Company and the Southend Waterworks Company, both of whom report that:-

- (a) The water supply of the whole area has been satisfactory in quantity and quality.
- (b) Bacteriological and chemical examinations are made of the raw water, of the water in its various stages of treatment and the water going into supply. A total of over 10,000 chemical, bacteriological and biological examinations have been made and all water going into supply was wholesome. In addition samples were examined for radioactivity. The fluorine content of supplies is put at 0.25 p.p.m. In water abstracted from rivers is 0.3 p.p.m. and from wells 3.5 p.p.m. Analyses have also been made of samples obtained from consumers taps in the various parts of the Company's district and all proved to be satisfactory. Resident Chemists examine daily the water going into supply from Hanningfield and fortnightly from the wells. These examinations show the water to be good chemically and excellent bacteriologically.
- (c) The water is not plumbo-solvent.
- (d) There was no contamination of water supplied to consumers.
- (e) The South Essex Waterworks Company supplied a population of about 54,638 by direct supply to 17,061 dwellinghouses. The number of houses supplied by standpipes was insignificant. Southend Waterworks Company supplied a population of 3,612 by direct supply to 1,075 dwellinghouses, but no houses by means of standpipes.

LAUNDRY SERVICE FOR THE INCONTINENT

Under the provisions of the Public Health Act, 1936, section 84, this free service is provided for those patients who are incontinent, and whose linen is unsuitable for sending to a commercial laundry.

The service is carried out twice weekly on Monday and Thursday mornings. Each patient is given a number and all articles sent must be marked with that number. A nylon bag is also provided together with a book for the patient to enter all articles sent. The book is in triplicate so that the top copy is given to the hospital receiving the bag, the second copy is retained at this office and the book kept by the patient.

The service commenced in 1961, and since that time we have been able to help some 163 patients. Nine new patients were received during 1969, and over 6,000 articles of clothing put through the washing machines at one of our local hospitals.

Brentwood Home Safety Committee
Hon:Secretary's Report for 1969.

On the 4th September, 1959, the Brentwood Home Safety Committee was formed, and to celebrate the tenth anniversary a special meeting was held at the Council Offices on the 16th October, 1969. Over one hundred representatives from local organisations were present to consider the causes of accidents that bring tragedy to so many lives.

Cllr. G.de C. Rolls, Chairman of the Brentwood Home Safety Committee, welcomed Miss Barbara Naish, M.B.E., Head of the Home Safety Department at the Royal Society for the Prevention of Accidents, who had been invited to address the meeting. Miss Naish had been at the Inaugural meeting ten years ago and said how pleased she was to be present on this occasion. In the United Kingdom every year about 8,000 people die as a result of home accidents, and the indications were that roughly 120,000 people had to receive hospital treatment as a result of such accidents. Children under five years of age and old people were the chief victims of accidents in the home. She spoke of a three pronged attack through Education, Engineering and Enforcement to reduce accidents. People must understand how accidents are caused. Homes, furniture and fittings must be designed so that they are safe. Existing laws must be enforced to ensure that innocent people are not injured by dangerous toys and materials.

An age/accident graph of those involved in fires was described as a 'valley of death' by Mr. P.G. Redpath of the Fire Protection Association in London, who had also been invited to address the meeting. In 1967, fire brigades were called to over 33,000 fires in dwellings in the United Kingdom. Just under 500 lives were lost in these fires and there were over 2,400 non-fatal casualties. So many of these fires could have been prevented by simple precautions; the unguarded fire or the defective heating appliance, but nearly a third of all fires start in the kitchens. Cooking fats are particularly dangerous; Polystyrene tiles are highly inflammable, and many 'do-it-yourself' craftsmen fail to realise that a number of the materials that they use increase fire risk in the home.

During this special meeting Cllr. H. Van den Branden, Chairman of the Brentwood Urban District Council, presented prizes to the winners of the Inter-Youth Club Home Safety Quiz Contest.

The Quiz Contest was organised by the Brentwood Youth Council and our own Committee. Local Youth Clubs formed teams of five members aged between 15 years and 21 years. Mr. J. Pearson, Youth Officer, was the Quiz Master. The Scorer and Time-keeper were also Officers of the Council of Youth. Questions were taken from material in the 'Teaching Packs' produced by RoSPA and purchased by the Committee.

The Squires Youth Club were the winners and received from the Committee the top prize of £10 and the Ingrave Youth Club received second prize of £5. Those who were present at the finals were most impressed at the high standard of answering the questions on home safety. To educate the young is of paramount importance and it is hoped that we shall be able to continue a further Quiz in 1970.

Other activities in 1969 included a Water Safety Campaign during the summer months. This Campaign commenced on Saturday, the 17th May, 1969, at the Ingrave Johnstone Primary School Fete when Mr. Palmer from the Essex County Council demonstrated the 'kiss-of-life' and showed films on 'Emergency Resuscitation'. Leaflets entitled 'Learn water sense' and 'Train for Safety' were distributed.

To encourage children to 'learn to swim' posters and leaflets were distributed to all local Primary and Junior Schools. Special publicity was given in the local Press warning parents of the dangers, and asking them to teach their children to swim and to follow the water safety code.

Further publicity was given by the display of posters on the UP and DOWN platforms at Shenfield and Brentwood Stations. A different poster for each month, for a period of one year.

Once again Christmas serviettes were given to the Old Folks' Clubs and Calendars to the scholars of the senior schools in the area. During the Christmas week an Exhibition was held at the Council Offices which was organised by the Road Safety Officers and to which 'home safety' leaflets and posters were made available for the public.

To the Brentwood Urban District Council I would say 'thank-you' for the annual grant of £250. This money enables us to purchase posters and literature essential for our work, and to carry on as much publicity in the local newspapers. I would also like to express the thanks of the committee to Dr. J.A.C. Franklin, County Medical Officer, and to his staff in the Health Education Section of the Essex County Council, for their continued support and last, but not least, to all the members of the Home Safety Committee for their loyalty in attending so many meetings and for helping generally during 1969.

Evelyn P. Turff. Hon:Secretary:

Comments from the Medical Officer of Health:

When the above report was submitted to the Health and Sewerage Committee I made the following statement :-

"The image of the Home Safety Committee is inclined to be highlighted more by drama than by glamour. This is almost inevitable when its chief publicity material so often features tragedy, and when the day-to-day preventative, yet valuable work, is necessarily of routine mundane character. It is exceedingly difficult to stimulate and maintain enthusiasm in work of this kind, and the support accorded to the Committee is not generally of an order which one might expect. I personally consider the work of the Committee to be of the greatest value and its backbone of workers deserving of real public appreciation."

SEWERAGE and SEWAGE DISPOSAL

I have received the following report from Mr. P.C. Emes, Engineer, Surveyor and Planning Officer, giving list of drainage schemes and their progress during 1969, with the projected schemes for 1970/71.

1. Nags Head Lane Sewage Disposal Works Extension was completed in July 1969. The work has a design dry weather flow of 1.37 m.g.d. and is estimated to have cost £800,000.
2. Rayleigh Road Main Drainage Scheme was completed in May, 1969, and provides a soil sewer for approximately 55 properties, the cost being £40,000. Basildon U.D.C. have since connected 19 of their properties which are adjacent to the boundary into the scheme.
3. Ilford Limited Trade Effluent Sewer and Balancing tank was completed in April, 1969. This scheme is a pre-treatment scheme for a photographic works prior to discharge to the public sewer - cost of scheme £55,900 approximately.
4. Rayleigh Road relay soil sewer, construction of surface water sewer Hutton Village. This scheme was completed in April at at cost of £20,000.
5. Shenfield Road relaying of surface water sewer - completed in July, 1969 - final cost approximately £3,000.
6. Billericay Road, Herongate this scheme involved the replacement of an existing small sewage treatment plant by a pumping station and rising main, and was completed in June, 1969, at a cost of £7,000.

Schemes which are currently under construction.

1. Stage 1 extensions to East Horndon Sewage Disposal Works - the work commenced in November, 1969, on the construction of a new pumping station and sludge drying beds at this works. These should be completed in August, 1970 - estimated cost £47,000.
2. Park Road Surface Water Sewer - this scheme was commenced in August and should be completed in March, 1970, to provide an adequate surface water outfall from the development in the Park Road area, estimated cost of £27,000.

Schemes which are currently under design.

1. Chelmsford Road Main Drainage scheme. This will provide main drainage to 16 properties in Chelmsford Road, and is estimated to cost £9,000. It is anticipated that the scheme will commence in May, 1970.

Schemes which are currently under design - continued -

2. Little Warley Hall Lane Main Drainage Scheme. This will provide main drainage to 19 properties in Little Warley Hall Lane and is estimated to cost £15,000 - anticipated starting date Autumn 1970.
3. Weald Sewer Pumping Station. This scheme is intended to replace a considerable length of defective sewer and is estimated to cost £8,000. The anticipated starting date is Autumn 1970.
4. Horndon Soil Drainage Schemes. This is a scheme to overcome the problems of lack of capacity in the soil sewers in the West Horndon area, and is estimated to cost £180,000. It is hoped that work will start in early 1971.

Shenfield Central Area S.W. Drainage Scheme:

This major scheme will be constructed in three stages and it is anticipated that stage 1 will commence in 1971 at an estimated cost of £300,000.

Crow Green Road - Relaying of Soil Sewer:

This scheme is in course of preparation and must be proceeded with during 1970 as a matter of urgency - the estimated cost being £15,000.

There are, of course, many other schemes to be considered, the principle ones being Stage 2 extensions of East Horndon Sewage Disposal Works (provision of storm tanks) and the Cortie Green Road main drainage scheme but dates for commencement cannot yet be given. The Council's largest scheme, the Western area drainage scheme has been delayed by virtue of staff commitments but it is hoped that this can be progressed to report stage during 1970.

Section " C "

GENERAL PROVISIONS OF HEALTH SERVICES FOR THE AREA

National Health Service Act, 1946 - Part II Hospital Services

	<u>Brentwood</u> <u>Dist:Hosp:</u>	<u>Maternity</u> <u>Home</u>	<u>Harold Wood</u> <u>Hospital</u>
1. Staffed beds allocated at 31st December, 1969.	62	24	380
2. Average daily number of available beds.	57.4	23.9	377.1
3. Average daily bed occupation during year	42.0	16.9	313.5
4. (a) Discharges & deaths	1513	787	7002
(b) Births during year		512	
<hr/>			
5. Annual Number of Consultative Clinic Sessions held	547		1606
6. New Out-patients	3732		8582
7. Total attendances during the year	11471		51469
<hr/>			
8. Accident and Emergency Attendances	796		31862
<hr/>			
9. <u>Physiotherapy:</u>			
(i) New In-patients	154	441	2614
Attendances	1541	694	20670
(ii) New Out-patients	1799	201	760
Attendances	22832	687	6614
<hr/>			
<u>Group Exercises:</u>			
New Patients			383
Attendances			3846
Total Treatments			8846
<hr/>			
10. <u>Chiropody:</u>			
(i) New In-patients			57
Attendances			135
(ii) New Out-patients			20
Attendances			507

BRENTWOOD GROUP HOSPITAL MANAGEMENT COMMITTEE

Annual Return for year ended 31st December, 1969.

(Heading in conjunction with previous page.)

	<u>High Wood Hospital & Chest Clinic</u>	<u>St. Faith's Hospital</u>	<u>Alexandra Annexe</u>	<u>Specialist Clinics</u>	<u>Totals:</u>
1.	187	298	28		979
2.	184.34	298	28		965.74
3.	164.0	132.6	28.2		697.2
4(a)	545	31	78		9956
(b)					512
5.	316			212	2681
6.	864			404	13582
7.	5493			2915	71348
8.					32658
9.	130	20			3359
	4071	862			27838
	242				3002
	2579				32712
					383
					384.6
					884.6
10.		3			60
		1321			1456
					20
					507

<u>Hospital Services continued:</u>		<u>Brentwood</u>	<u>Maternity</u>	<u>Harold Wood</u>
		<u>Dist:Hosp:</u>	<u>Home</u>	<u>Hospital</u>
11.	<u>Occupational Therapy:</u>			
	(i) New In-patients			1628
	Attendances			7372
	(ii) New Out-patients			3291
	Attendances			22702
<hr/>				
12.	<u>Speech Therapy:</u>			
	(i) New In-patients			3
	Attendances			59
	(ii) New Out-patients			6
	Attendances			230
<hr/>				
13.	<u>Audiometry:</u>			
	(i) New In-patients	1		4
	Attendances	1		5
	(ii) New Out-patients	106		86
	Attendances	227		240
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14.	<u>Orthoptics:</u>			
	(i) New In-Patients			
	Attendances			
	(ii) New Out-patients			
	Attendances			
<hr/>				
15.	<u>Surgical Appliances:</u>			
	(i) New In-patients			130
	Attendances			161
	(ii) New Out-patients	443		740
	Attendances	1636		1849
<hr/>				
16.	<u>Dietetics:</u>			
	(i) New In-patients			510
	Attendances			13670
	(ii) New Out-patients			246
	Attendances			1240
<hr/>				
17.	<u>X-ray Units:</u>			
	(i) In-patients	609		35775
	(ii) Out-patients	14433		30757
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18.	<u>Electrocardiography:</u>			
	(i) New In-patients	45		846
	Attendances	81		2897
	(ii) New Out-patients	145		381
	Attendances	237		996
<hr/>				

<u>High Wood Hospital & Chest Clinic</u>	<u>St.Faith's Hospital</u>	<u>Alexandra Annexe</u>	<u>Specialist Clinic</u>	<u>Totals:</u>
11.	54 3395 18 1453	4 7702		1686 18469 3309 24155
12.				3 59 6 230
13.				5 6 192 467
14.	125 544		404 2915	- - 529 3459
15.				130 161 1183 3485
16.				510 13670 246 1240
17.	1328 249) 6038)(Chest Clinic)			37712 51477
18.				891 2978 526 1233

WARLEY HOSPITAL

Dr. D.P. Cronin, Acting Physician Superintendent has kindly given me the following information:-

" During the year there were 183 deaths, of which 44 were in the age group 65/74 years; 48 were in the age group 75/79 years; 59 were in the age group 80/89 years; and 11 aged 90 years or over; thus, a total of 162 (88.5%) were over 65 years at death.

Average Age:	<u>Male:</u> 74.3 years	<u>Female:</u> 76.4 years
Deaths over 70 years	77.4%	84.3%
Deaths 70/79 group:	41.9%	43.0%
Deaths Percentages:	9.1%	12.9%
<u>Total: 13.8%</u>		

	<u>Male:</u>	<u>Female:</u>	<u>Total</u>
(1) Number of patients on books 31.12.68.	687	982	1,669
(2) Admitted during 1969	617	871	1,488
(3) Discharged and left during 1969.	559	789	1,348
(4) Transferred to other hospitals	1	2	3
(5) Died	62	121	183
(6) On books at 31.12.69.	682	941	1,623

Of these:

(7) Under Section 25 of M.H.A. 1959	1	5	6
(8) Under Section 26 of M.H.A. 1959	12	9	21
(9) Under Section 60 of M.H.A. 1959	11	-	11
(10) Under Para.IX of 6th Schedule, M.H.A.	2	5	7
(11) On an Informal basis	656	922	1,578

The number of admissions has decreased by 10.9% during the year, which is in keeping with the trend over the past few years, both at this Hospital and over the country as a whole. The readmission rate, however, has increased by 5%, being 60% of the total number of admissions. This again is in keeping with the national trend and is often referred to as the "revolving door" policy. The number of Informal admissions has decreased by 3%, this also being in line with the fall in admissions generally. "

NATIONAL BLOOD TRANSFUSION SERVICE

I have received the following report from the Director of the North-East Metropolitan Regional Blood Transfusion Centre:-

" In 1969 blood donor sessions for the Brentwood panel were again held in St.Thomas' Parish Hall, Eastfield Road, and the Territorial Army Drill Hall, Chestnut Grove, St. Mary's Parish Hall, Hutton Road, Shenfield and at the Cousins Hall, Crescent Drive, Brentwood.

The attendance of blood donors at the 19 sessions held during the year was 2,044. Members of the W.R.V.S. Brentwood, continued to give valuable help to the Blood Transfusion Service by providing regular assistance at these sessions. Local firms have also co-operated in allowing blood donors to give their donations in working time and in some instances have permitted sessions to be held on the premises. 905 donors gave their services at such sessions during the past year.

With the increasing use of blood transfusion therapy in hospitals throughout the North-East Metropolitan Region served by the Regional Transfusion Centre at Brentwood, the need for new volunteers as blood donors is an essential one.

All who are in good health and between the ages of 18 and 65 years are asked to enrol as blood donors. Further information may be obtained from the Regional Donor Organiser, North-East Metropolitan Regional Blood Transfusion Centre, Crescent Drive, Brentwood. Telephone: Brentwood 3545. "

PART III - LOCAL HEALTH AUTHORITY SERVICES

The following is a list of the Clinical Sessions provided by the Mid-Essex Area Sub-Committee of the Essex County Council, and held at the Brentwood Combined Treatment Centre, 39, Queens Road, Brentwood. Essex. Telephone: Brentwood 1863.

<u>Type of Service</u>	<u>Day and Time</u>
Child Welfare	Monday afternoons, 2 - 4 p.m.
School Clinic (by appointment)	Tuesday mornings
Immunisation & vaccination "	Tuesday mornings, 1st in mth.
Relaxation Classes "	Wednesday afternoons, 2 - 4 p.m.
Speech Therapy "	Thursday & Friday mornings.
Dental Inspection & treatment	By appointment only.
Ophthalmic Clinic	Thursday mornings, by appointment.
Chiropody (for Old Age Pensioners,	By appointment only.
" persons handicapped &	By appointment only.
" expectant mothers)	By appointment only.
Cervical cytology	By appointment only.
Child Health Clinic	Friday afternoons, 1st, 3rd & 5th in the month.

The following is a list of Clinical Sessions provided at the Three Arch Bridge Clinic, Cherry Avenue, Brentwood. Essex. (Telephone: Brentwood 767)

<u>Type of Service</u>	<u>Day and Time</u>
Immunisation	Monday afternoons, 3rd in month.
School Clinic	Tuesday mornings, 1st, 3rd & 5th in mth.
Audiometry Sessions	Tuesday mornings, 4th in the month.
Chiropody (by appointment only)	Tuesday mornings, 2nd & 4th in the mth.
Speech Therapy " "	Tuesday afternoons.
Child Health Clinic	Wednesday afternoons 2 - 4 p.m.
Child Health Clinic, with Doctor.	Wednesday afternoons 3rd in month.
Cervical cytology (by appointment)	Thursday mornings, 1st & 3rd in mth.
Womens' Welfare	Thursday mornings, 1st & 3rd in mth.
Ophthalmic Clinic (by appointment)	Fridays, 2nd in the month.

The following is a list of Clinical Sessions at the Hutton Clinic
Coram Green, Hutton, Brentwood. Essex. (Telephone: Brentwood 6182)

<u>Type of Service</u>	<u>Day and Time</u>
Immunisation (by appointment)	First Monday in the month.
Dental Clinic	Mondays, by appointment only.
Midwives' Clinic	Monday afternoons, 1st & 3rd in mth.
Relaxation Classes	Tuesday mornings.
Child Health Clinic, with Doctor.	Tuesday afternoons.
School Clinic	Wednesday mornings. 2nd & 4th in mth.
Child Health Clinic	Wednesday afternoons
Ophthalmic Clinic (by appointment)	1st Wednesday & 4th Friday
Audiometry Sessions	Thursday mornings 2nd in mth.
Cervical cytology (by appointment)	Thursday afternoons 1st & 3rd in mth.

<u>Meeting Place</u>	<u>Day and Time</u>
Ingrave Clinic (Doctor in attendance) held at St. Nicholas Hall, Ingrave.	Monday afternoons 2nd & 4th in month.
South Weald Clinic held at 85, London Road, Brentwood.	Tuesday afternoons 2nd & 4th in month.
Keys Hall, Eagle Way, Warley. (opposite Fords Office)	Tuesday afternoons 3rd in month.
Bentley Clinic (Doctor in attendance) held at the Village Hall, Bentley. Child Health Clinic	Tuesdays, 4th in mth. for immunisation. Every Thursday afternoon.
West Horndon Clinic held at the Village Hall, Thorndon Avenue. (Doctor in attendance)	Thursday afternoons 2nd & 4th in month.
Clinic held at the Village Hall, Roman Road, Mountnessing.	Thursday afternoons 2nd in the month.

VACCINATION and IMMUNISATION

The following information on the number of people given various protective immunisation during the year has been received from the Area Health Office at Chelmsford.

<u>Primary Courses carried out by:-</u>	<u>G.P.'s</u>	<u>County Staff</u>	<u>Total:</u>
Diphtheria, pertussis & tetanus	239	94	333
Diphtheria & tetanus	9	17	26
Diphtheria	-	1	1
Tetanus	39	12	51
Poliomyelitis: Sabin Vaccine - (3 doses)	270	129	399
Smallpox	429	20	449
B.C.G.	-	935	935
Measles	283	152	435
Totals:	1,269	1,360	2,629

Re-inforcing Doses:

Diphtheria, pertussis & tetanus	301	161	462
Diphtheria & tetanus	371	245	616
Diphtheria	6	3	9
Tetanus	130	22	152
Poliomyelitis: (1 dose after 3 sabin)	674	478	1,152
Smallpox	191	1	192
Totals:	1,673	910	2,583

HOME HELP SERVICE

I have received from the Area Medical Officer, Dr. J.L.Miller Wood, the following statistics which refer to the Home Help Service in the Brentwood area for 1969.

Home Help Organiser:- Mrs. S.Mackenzie with a staff of 66 Part-time Home Helps.

New requests for help = 225

Working Hours of Home Helps provided for beneficiaries:

<u>Period</u>	<u>Age 65 years & over</u>	<u>Maternity</u>	<u>Chronic sick under 65.</u>	<u>Short- term Cases</u>	<u>Totals:</u>
Jan/Mar	1,126	271	1,006	86	12,579
Apl/June	10,185	184	906	61	11,336
Jul/Sept.	9,452	122	934	94	10,602
Oct/Dec.	11,848	317	958	123	13,246
	<u>32,611</u>	<u>894</u>	<u>3,804</u>	<u>364</u>	<u>47,763</u>

Total number of Cases Helped during the year:

<u>Period</u>	<u>Age 65 years & over</u>	<u>Maternity</u>	<u>Chronic sick under 65.</u>	<u>Short term Cases</u>	<u>Totals:</u>
Jan/Mar:	239	11	30	7	287
Apl/June	245	13	29	7	294
Jul/Sept.	244	6	29	8	287
Oct/Dec.	256	14	27	8	305
	<u>984</u>	<u>44</u>	<u>115</u>	<u>30</u>	<u>1,173</u>

THE COUNTY AMBULANCE SERVICE

The Ambulance service is centrally administered and is the responsibility of the Essex County Council. Dr. J.A.C. Franklin has kindly provided the following information relating to the operation of the County Ambulance Service in the Brentwood Urban District during 1969 :-

Ambulance vehicles	2
Dual Purpose vehicles	2
Sitting Case vehicles	2
Total Mileage	131,996
Stretcher Cases conveyed	1,741
Other Cases conveyed	21,060
Total Cases conveyed	22,801
Emergency Cases	1,511

Section " D "

DEPARTMENT OF THE CHIEF PUBLIC HEALTH INSPECTOR

Inspection of Area

<u>Housing Inspection:</u>	<u>Visits:</u>
Housing Acts 1936-1957 (Demolition or Closure)	262
Housing Act, 1957. (Repair of Housing Defects)	604
Public Health Act, 1936 (Remedy of Sanitary Defects)	275
Housing Acts - Improvement Grants	626
Housing Acts - Standard Grants	40
Housing Acts - Inquiries re Grants etc.	132
House Improvements (Compulsory)	26
Houses in Multiple Occupation	84
Housing Acts (overcrowding)	35
Miscellaneous Housing Matters	24
<u>General:</u>	
Public Health Act (General)	734
Infectious Diseases	661
Food Poisoning Investigation	172
Verminous or Dirty Premises	60
Disinfestation (Pests)	123
Water supplies	130
Drainage & Sewerage, Cesspools etc.	893
Ponds, ditches etc.	331
Keeping of swine, fowl etc.	174
Accumulation of Refuse	175
Refuse Tips	90
Rats and Mice (General)	237
Rats and Mice (Sewer Baiting)	44
Factories (Power)	129
Factories (Non-power)	7
Outworkers	35
Hairdressers' Premises, Massage Establishments etc.	38
Pet Shops	7
Moveable Dwellings	121
Swimming Bath Visits	36
Swimming Bath Samples	66
Diseases of Animals Act (Waste Foods Order)	23
Clean Air Act, 1956.	304
Smoke Observations	397
Schools (Washing & Sanitary Facilities etc.)	37
Day Nurseries & similar establishments	26
Agriculture (Safety, Health & Welfare Provisions) Act, 1956	40
Shops Act (re Closing Hours etc.)	9
Noise Abatement Act	524
Betting & Gaming Act	27
Miscellaneous Visits	522
Miscellaneous Interviews	83
	<hr/>
Total:	8,363
	<hr/>
Number of Complaints received during the year	754

FOOD PREMISES - VISITS

Food Factories	48
Butchers' Shops	93
Fried Fish Shops	70
Other Food Shops	314
Cafes etc.	161
Licensed Premises	98
Ice-cream Premises	75
Dairies & Milk Shops	61
Bakehouses	13
Canteens (School)	71
Canteens (Factory)	76
Canteens (Institutional)	24
Mobile Shops	31
Milk & Ice-cream Vehicles	15
Visits re Food & Drugs Samples	125
Visits re Food Complaints	98

Total: 1,373

<u>UN SOUND</u> <u>FOOD CONDEMNED</u>		<u>lbs:</u>
<u>Frozen Foods:</u>	Meat	3,946
	Fish	1,615
	Fruit	419
	Vegetables	1,599
	Ice-cream products	745
	Other frozen foods	546
<u>Tinned Foods:</u>	Meat	392
	Fish	16
	Fruit	3,084
	Vegetables	1,613
	Other tinned foods	8
<u>Other Foods:</u>	Gammon	2,454
	Chicken	379
	Meat	603
	Fish	517
	Fruit	249
	Vegetables	125
	Other fresh foods	101
<u>Miscellaneous</u> <u>Items:</u>	Confectionery	110
		<u>18,521 lbs</u>

The total amount of unsound food condemned
during 1969 = 8 tons 5 cwts + 41 lbs.

FOOD PREMISES

The supervision of food premises again occupied much of the working time of the Public Health Inspectors, and it can be said that standards generally remained satisfactory.

It was, however, unfortunately necessary to prosecute the Proprietor of a Country Club for twelve offences under the Food Hygiene (General) Regulations, 1960. The offender was fined £90 with £30 costs.

One stallholder was also fined a total of £18 plus £10 costs under the Food Hygiene (Market, Stalls and Delivery Vehicles) Regulations, 1966, for several contraventions of the regulations.

It is hardly necessary to say that the education of food handlers is considered to be much more important than the taking of prosecutions and the primary function of the Public Health Inspector in this field is to prevent the sale of unsound food or of food containing pathogenic organisms.

FOOD HYGIENE (GENERAL) REGULATIONS, 1960.

Type of Premises	Number in district according to records	Number complying with Reg: 16.	Number of which Reg: 19 applies	Fitted to comply with Reg: 19.
Bakehouses and Bakers' Shops	12	12	12	12
Butchers' Shops	28	28	28	28
Cafes etc.	28	28	28	28
Confectioners	41	-	-	-
Fish Shops(Wet & Fried)	10	10	10	10
Greengrocers	22	22	22	22
Multiple Stores	11	11	11	11
Grocers' Shops	50	50	50	50
Institutional Canteens	18	18	18	18
School Canteens	33	33	33	33
Works Canteens	15	15	15	15
Catering(Miscellaneous)	7	7	7	7
Licensed Premises and Off Licences	64	64	64	64

MILK SUPPLIES

Bacteriological Sampling

Samples taken were as follows:-

Pasteurised	46
Sterilised	4
Raw	9

One sample of Pasteurised Milk was unsatisfactory. Two samples were taken and proved negative for the presence of "Brucella Abortus". These results can be considered very satisfactory.

ICE-CREAM

Bacteriological Sampling

47 Samples of ice-cream were taken and all of these proved to be satisfactory.

OTHER FOOD

Bacteriological Sampling

	<u>Number of Samples:</u>	<u>Satisfactory</u>	<u>Unsatisfactory:</u>
Shellfish	1	1	-
'Fido' meat	1	1	-
'Fido' liver	2	2	-
'Fido' chicken	1	1	-
Cold Slaw	1	1	-
Pork Luncheon Meat	1	1	-
Swabs of Food Containers	65	65	-
Fords, Warley (Sampling at Frozen Food Depot)	1043	1042	1

The amount of time which it is possible to spend on bacteriological food sampling, which often involves long and involved follow-up procedure, was unfortunately very limited, but the results of those samples which were taken were very satisfactory. The swabbing of food containers etc., was in connection with some cases of suspected food poisoning. All of the swabs proved negative for the suspected organism.

Only one sample of over 1,000 taken from the Food Depot at Warley was unsatisfactory, and the depot are to be congratulated on once again achieving such a markedly high standard.

FOOD and DRUGS ACT, 1955

Food Sampling

A total of 189 informal and formal samples were taken during the year and submitted for examination. 174 samples were satisfactory. Details of the unsatisfactory samples are given below:-

Pork sausages	Deficient in meat content;
Pork sausages	No declaration of preservatives;
Beef sausages (2)	No declaration of preservatives;
Gin	Contained extraneous water;
Apricot pudding	Contained glass fragments;
Lemon Squash (2)	Incorrectly labelled;
Frittamix	Incorrectly labelled;
Frucadian Sandwich	Incorrectly labelled;
Milk Churn lid)	Contained dried milk with small quantity of tea leaf.
Milk Churn lid)	
Chocolate Yoghurt	Fat content high for yoghurt described as 'low fat' ;
Rum	Slightly understrength;
Cystitis mixture	Deficient in Potassium Acetate.

The majority of these unsatisfactory samples were dealt with informally, but the Council decided to institute proceedings in respect of the apricot pudding which contained glass fragments, and the firm concerned pleaded guilty to the offence. In view of their good record, however, they were granted a discharge.

SWIMMING BATH SAMPLES

Results of samples taken during 1969 were as follows:-

	<u>Samples taken:</u>	<u>Satisfactory:</u>	<u>Unsatisfactory:</u>
Brentwood U.D.C. Baths	10	10	-
Brentwood Grammar School	2	2	-
Brentwood County High "	3	3	-
Shenfield Technical "	11	11	-
Ursuline Convent	3	3	-
Pilgrims Hatch Junior "	8	6	2
Hutton Poplars, Hutton.	11	11	-
Brentwood Preparatory "	2	2	-

CLEAN AIR ACT, 1956.

No further smoke control areas were made during the course of the year. 304 visits were, however, made in connection with the general application of the Act, which continues to receive active attention by the Public Health Inspectors.

REFUSE DISPOSAL.

Refuse disposal is by means of tipping at the Council's tip in Coxtie Green Road, Brentwood. Whilst operations generally were satisfactory, problems arose during the year with effluent from the tip which are currently being dealt with and there was a comparatively brief period when the covering of refuse was considered inadequate. The purchase of a new vehicle which enables cover to be spread more easily and quickly has, however, dealt very largely with this problem.

OVERCROWDING.

During 1969 only two cases of overcrowding were brought to the formal notice of this department. Both cases were referred for the attention of the Housing Manager and no action was necessary by the Public Health Department.

COMMON LODGING HOUSES

There are no common lodging houses in the Urban District.

VISITS BY DISINFESTATION AND RODENT OFFICER

Laundry Service for the Incontinent (number of calls to patients)	924
Rat destruction	2,812
Disinfestation	53
Pond Treatment (Mosquito control)	61
Drain Testing etc.	4
Assisting Public Health Inspectors	5
Conveyance of Welfare foods	46
Rat destruction at Refuse Tip	43
Rat destruction at Sewage Works	106
Total:	4,054

THE LIQUID EGG (Pasteurisation) REGULATIONS, 1963.

There are no egg pasteurisation plants in the Urban District.

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963:Visits:

General Survey	249
Offices - General inspection	40
Offices - Other inspections	62
Retail Shops - General inspection	122
Retail Shops - Other inspections	150
Wholesale Shops & Warehouses - General inspection	3
Wholesale Shops & Warehouses - Other inspections	3
Catering Establishments - General inspection	68
Catering Establishments - Other inspections	28
Canteens - General inspection	1
Canteens - Other inspections	3
Fuel Stores - General inspections etc.	-
Total:	<hr/> 729 <hr/>

During the year 729 visits were made under the Act, a considerable increase on the previous year's total. This was due in the main to a re-survey of the premises in the district coming within the scope of the Act. Numerous changes had occurred it was found, particularly where buildings were in multiple occupation. Rarely it was found had the change been reported and the premises affected suitably registered..

The total number of contraventions against the Act was twenty-three, a reduced figure against the previous years total. However, items such as cleanliness of premises were often dealt with in combination with Food Hygiene Offences. The requirement most frequently found wanting was the failure to maintain an adequate temperature within the premises concerned. The other items most noticeable were failure to supply and maintain adequate First Aid material and failure to display Abstracts of the Act.

All offences were dealt with informally, in no instance was it necessary to institute legal proceedings.

As far as accidents were concerned the welcome trend **which was** noted the previous year did not continue, the number reported to the department was seventeen, almost double the previous year's figure. None fortunately were fatal and all were investigated. Once again falls proved to be the major cause, but there were four instances in which the accident was due to the mismanagement of machinery.

In one of the latter cases the accident was due to the assistant's failure to use safety equipment provided for his use, whilst in the same store a young assistant used a slicing machine after being expressly forbidden to do so. Both paid the penalty, one for over familiarity, the other for inexperience. It is difficult for the management of large companies in cases such as these where, because of their own negligence, or because of their failure to obey orders or instructions, employees damage themselves. Only so much time can be given to watching over them to try and protect them from their carelessness or lack of training.

Generally the standard of compliance with the requirements of the Act is good, particularly with firms of National Stature, Insurance Companies, Supermarkets etc., there are, however, the usual percentage of firms where persistent pressure has to be applied to achieve the desired end.

HOUSING

During the year one house was demolished and eleven closed. Seventy-five houses were made fit after formal and informal action by the department.

Applications for improvement grants continue to be dealt with by the Public Health Department, so much so that the Deputy Chief Public Health Inspector, who deals with these now has to devote himself almost full time to this work.

An overwhelming mass of legislation (vide the Housing Act, 1969 etc.) continues to emerge from the Government machine. Those responsible seem to have little idea of the needless complexity of their Acts, Orders, Circulars, Regulations, Codes of practice etc., all of which have to be applied by Local Government Officers, who actually have to put the schemes into practice and try to make them work; whilst they are expected to carry on with the rest of their duties in the same old way without any extra overtime. It is surely time to return to the days when Acts were sensibly and properly framed so that they could be interpreted with common sense by officials, and in the last extreme by the Courts. The motto should be "less paper, better houses". We could all use a little less guidance from circulars etc., and more Acts based on the model of the 1936 Public Health and Housing Acts. The more circulars that are needed to explain the Acts, the worse the legislation probably is !

HOUSING STATISTICS

Houses in clearance areas and unfit houses elsewhere:-

(a) Houses demolished during the year:

In clearance areas	...	...	...	Nil
Not in clearance areas (as a result of formal or informal procedure under Section 17 (1) Housing Act, 1957)	...	...	...	1
Number of separate dwellings contained therein	...	...	...	1

(b) Unfit houses closed during the year:

Under Section 16 (4) 17 (1) and 35 (1) Housing Acts 1957 & Section 26 Housing Act, 1961.	...	...	14
Number of separate dwellings contained therein	...	...	14

(c) Unfit houses made fit and houses in which defects were remedied:

(a) After informal action by Local Authority	...	...	53
(b) After formal notice under:-			
(1) Public Health Acts	...	...	4
(2) Sections 9 and 16 Housing Act, 1957	...	...	4
(3) After determination of Closing Orders	...	...	6
(4) Other Defects remedied after formal notice under Public Health Acts	...	...	8

THE ADMINISTRATION OF THE FACTORIES ACT, 1961

INSPECTIONS for the purpose of provisions as to health (including inspections made by Public Health Inspectors).

Premises	No: on Register	Number of Inspections	- Written Notices	Number of :- Occupiers prosecuted
(1)	(2)	(3)	(4)	(5)
(a) Factories in which Sections 1,2, 3,4, & 6 are to be enforced by Local Authority	12	7	-	-
(b) Factories not included in (a) in which Section 7 is enforced by the Local Authority ...	160	142	3	-
(c) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	-	-	-	-
Total:	172	149	3	-

CASES in which DEFECTS were found (If defects are discovered at the premises on two, three or more separate occasions they should be reckoned as two, three or more 'cases').

Particulars:	Found:	Remedied:	Referred:-		Number of cases
(1)	(2)	(3)	To: H.M. Inspector:	By: H.M. Inspector:	in which prosecutions were instituted.
(1)	(2)	(3)	(4)	(5)	(6)
Want of cleanliness (S.1)	5	5	-	-	-
Overcrowding(S.2)	-	-	-	-	-
Unreasonable temperature (S.3)	-	-	-	-	-
Inadequate ventilation (S.4)	-	-	-	-	-
Ineffective drainage of floors (S.6)	-	-	-	-	-
Sanitary conveniences(S.7)					
(a)Insufficient;	1	1	-	-	-
(b)Unsuitable or defective;	2	5	-	-	-
(c)Not separate for sexes;	-	-	-	-	-
Other offences against the Act (not including offences relating to Outwork)	-	-	-	-	-
Total:	8	11	-	-	-

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